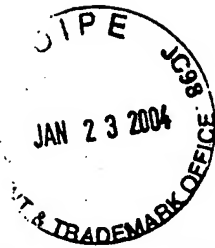


BS00-035-CON



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

MEADOWS ET AL.

Serial No.: 10/734,171

Filed: December 15, 2003

For: METHOD AND SYSTEM FOR
MONITORING VEHICULAR
TRAFFIC USING A WIRELESS
COMMUNICATIONS NETWORK

Art Unit: 2632

Examiner: Not Yet Assigned

SECOND PRELIMINARY AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Prior to the examination of the above-identified application, please amend the application as follows:

Any fee not covered by a check accompanying this paper and necessary for consideration of this Preliminary Amendment response may be charged to Deposit Account Number 50-1390.

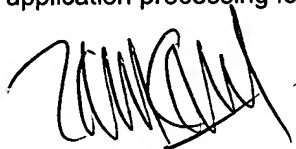
Amendments to the Specification: begin on page 2 of this paper.

Amendments to the Claims: reflected in the listing of claims that begins on page 3 of this paper.

Remarks: begin on page 8 of this paper.

01/28/2004 HLE333 00000100 501390 10734171

01 FC:1202 36.00 DA

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. BS00-035-CON	
Applicant(s): Meadows et al.					
Serial No. 10/734,171	Filing Date 12/15/03	Examiner Not Yet Assigned		Group Art Unit 2632	
Invention: METHOD AND SYSTEM FOR MONITORING VEHICULAR TRAFFIC USING A WIRELESS COMMUNICATIONS NETWORK					
<u>TO THE COMMISSIONER FOR PATENTS:</u> Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	22 -	20 =	2 x	\$18.00	\$36.00
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$36.00
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 50-1390 in the amount of \$36.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1390 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ <i>Signature</i>			Dated: January 23, 2004		
Poh C. Chua Registration No. 44,615 Shaw Pittman LLP 1650 Tysons Boulevard McLean, VA 22102			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. <div style="text-align: center;"> _____ <i>Signature of Person Mailing Correspondence</i> </div> <div style="text-align: center;"> _____ <i>Typed or Printed Name of Person Mailing Correspondence</i> </div>		
cc: Customer No. 28970					